STATE OF HAWAII
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS HIOSH / BOILER AND ELEVATOR INSPECTION BRANCH 830 PUNCHBOWL STREET, RM. 425, HONOLULU, HI. 96813 PHONE: (808)-586-9141 FAX (808)-586-9104

APPLICATION FOR INSTALLATION PERMIT

	Application Date					
OJECT NAME						
		,	,	,	,	
OJECT ADDRESS	STREET	CITY	STATE	ZIP CODE	PHONE N	
ME OF INSTALLER (If o	ther than the Applicant)					
DRESS OF INSTALLER	STREET		STATE	ZIP CODE	/PHONE N	
	STREET	CITY	STATE	ZIP CODE	PHONE N	
LICENSE NO.		E>	(PIRATION DA	TE		
NTACT PERSON AT SIT	ГЕ	/		/		
NTACT PERSON AT SITE		ase print)	POSITION / COMPANY PHONE			
AW / HHB / HPV NO. OR N	IATIONAL BOARD NO. OF	AGE)? YESNO EL AT THIS PROJECT ADDRESS ? OBJECT TO BE REPLACED_ , ADDRESS AND PHONE NO. OF NEW				
TYPE OF OBJECT	ΔΡΟΙΙ	CATION FEE	QUANTITY NATIONAL BOARI		I BOARD NO	
TITE OF OBJECT	INITIAL INSTALLATION	RETROFIT (SAME SIZE/CAPACITY)	QUANTI	QUANTITI NATIONAL BOARD NO		
1. POWER BOILER (over 15 psi steam)	\$190.00 each	\$190.00 each				
2. HEATING BOILER (heater,15# steam,etc.)	\$150.00 each	\$125.00 each				
3. PRESSURE VESSEL (air/hot water tank,etc.)	\$135.00 each	\$100.00 each				
4. STERILIZER/KETTLE (unfired)	\$120.00 each	\$80.00 each				
2. THE BOILER INSPECT VESSEL, AS REQUIRE 3. IF THE OBJECT IS FOR 4. THE NATIONAL BOARI 5. OBTAIN A COPY OF TH 6. A LAY OUT / DRAWING 7. DETERMINE THE TOTA 8. APPLICATION WILL NO 9. MAIL APPLICATION AN ELEVATOR INSPECTIO	ION BRANCH SHALL BE N D BY LAW. R PERSONAL USE, DISREOD NO. SHOULD BE COPIED HE MANUFACTURER'S DASSED SHOWING ALL THE CLEAR AL APPLICATION FEE FROODT BE PROCESSED UNLESSED ON BRANCH, 830 PUNCHBUTTHE APPLICANT ACCEPT	ALLATION OF AN AIR TANK OR HOT WOTIFIED UPON RELOCATION, TRANSF GARD NOS. 5, 6, AND 7 BELOW. D FROM THE VESSEL'S NAMEPLATE. TA REPORT AND ATTACH TO THIS AI ARANCES AROUND THE OBJECT SHAD OM THE ABOVE TABLE AND MAKE CH ESS THE APPLICATION FEE IS RECEIVEDE HAWAII, DEPARTMENT OF LABOR A OWL STREET, RM. 425, HONOLULU, HE STHE RESPONSIBILITY OF ASSURING AIR BOILER SAFETY STANDARDS.	PPLICATION. LL ACCOMPANY ECK TO: DIRE ED. ND INDUSTRIAL II. 96813	SHIP, OR SALE OI THIS APPLICATI CTOR,BUDGE RELATION, HIOS	ON. T & FINANC H/BOILER AN	
APPLICANT	Company Name	Street		City	State	
						
S	Signature 	Position / Title	C –4	License No.	Expiration Da	
		FOR DEPARTMENT USE ONLY				
APPROVED BY PERMIT NO DATE	_	INSPECTION DATEBY				